

*CALIFORNIA'S
INTEGRATED CORE
PRACTICE MODEL FOR
CHILDREN, YOUTH AND
FAMILIES*

PRIMER SERIES 1--
ENGAGEMENT

The California Integrated Core
Practice Model for Children,
Youth, And Families



INTRODUCTION AND BACKGROUND...

- ▶ This is the second in a series of **primers** based on California's Integrated Core Practice Model Guide for Children, Youth and Families.
- ▶ Today's focus is **not on compliance** with any rules and mandates associated with Katie A. or CCR.
- ▶ It is an orientation to the **professional behaviors** which foster effective engagement as the first and most fundamental element of healing.
- ▶ Engagement is one of five ICPM domains.


CALIFORNIA'S INTEGRATED CORE PRACTICE MODEL

“Provides specific expectations for best practices in child welfare, juvenile probation, mental health, and community partners as they work **collaboratively** to serve the child, youth, and family members and/or caregivers in achieving their goals.”

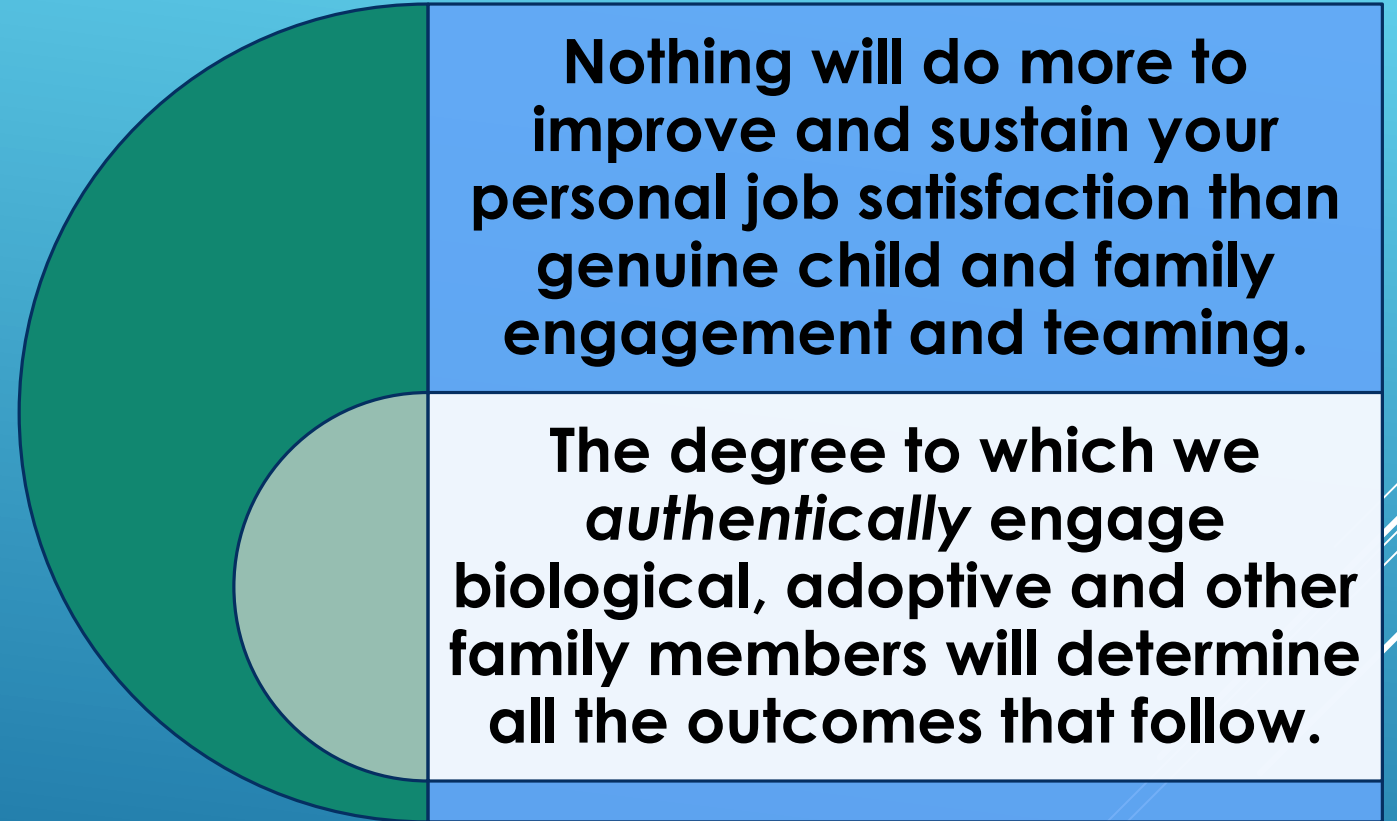
LAST MONTH: TRANSITIONS/CARE COORDINATION

- ▶ Has our youth's referral information been received?
- ▶ Have you received all necessary Health, Education or related records to begin care?
- ▶ Has our youth been engaged by the new service provider(s)?
- ▶ Has our youth been seen for her/his intake or first service session?
- ▶ Do you have a CFT scheduled or are you/your provider aware of current CFT schedule?

GOALS FOR TODAY:

- ▶ *Define “Engagement” in a health and human service context*
 - ▶ *Identify effective engagement practices and their value to successful service outcomes*
 - ▶ *Identify and discuss how the state’s Integrated Core Practice Model supports Engagement*
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- A series of white diagonal lines of varying lengths and thicknesses are positioned on the right side of the slide, extending from the middle towards the bottom right corner.

IMPORTANT IDEAS TO TAKE AWAY



RESEARCH SUGGESTS...

*“When families are engaged and supported to have a **significant role** in case planning, they are **more motivated** to actively commit to achieving the case plan.*

...And are more likely to recognize and agree with the identified problems; perceive goals as relevant and attainable; and be satisfied with the planning and decision-making process.”

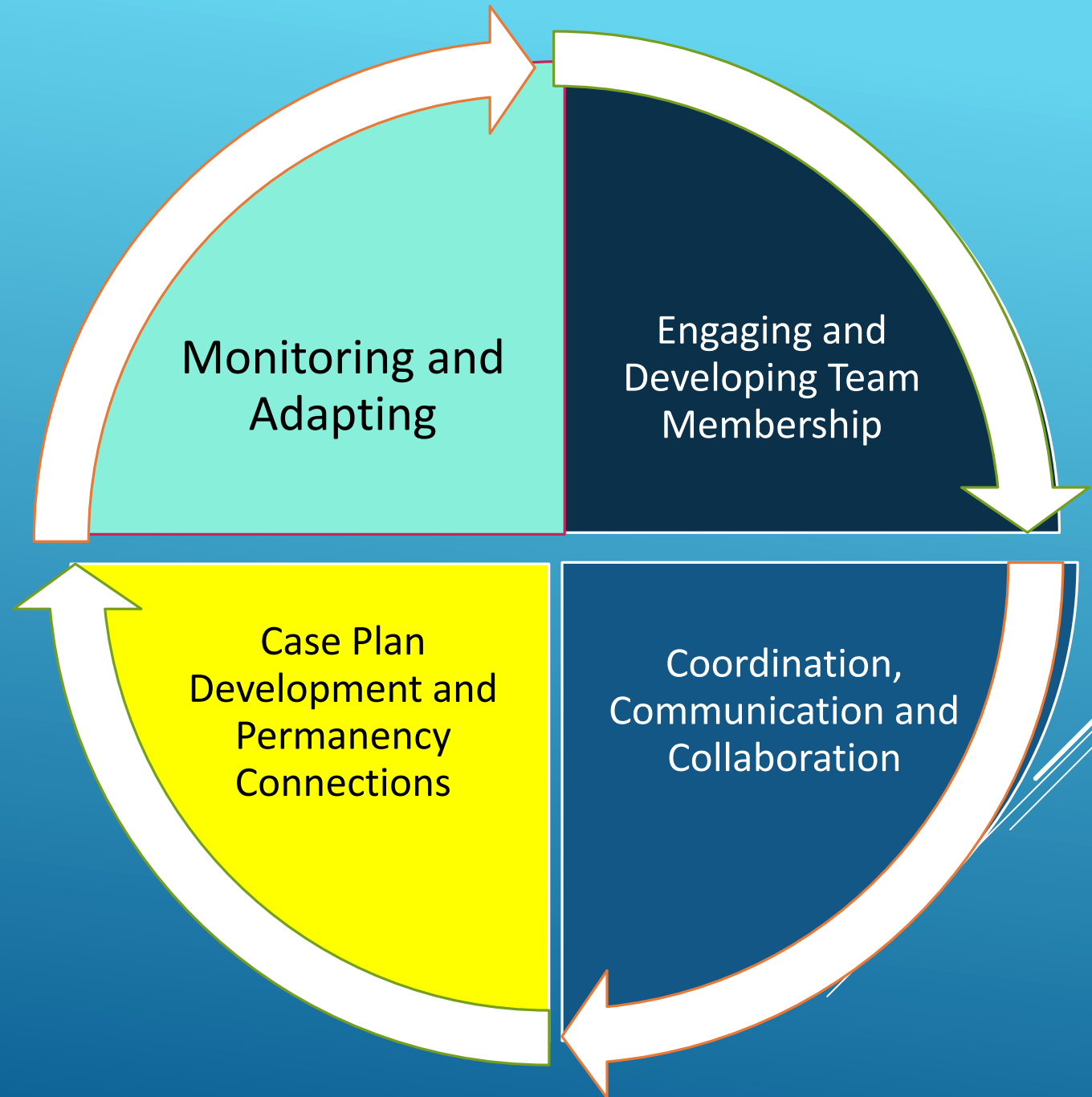
- Antle, Christensen, van Zyl, & Barbee, 2012; Healy, Darlington, & Yellowlees, 2011; Dawson & Berry, 2001; Jones, McGura, & Shyne, 1981.

ELEMENTS OF THE CORE PRACTICE PROCESS

- ▶ **Engagement**
- ▶ **Assessment**
- ▶ **Service planning and delivery**
- ▶ **Monitoring and adapting**
- ▶ **Transitioning**

This framework is built on the adoption of System of Care and wraparound values and principles that guided the Katie A. Settlement Agreement, as well as other research based values and theories.

**Engagement
never ends...**



- ▶ The range of activities, behaviors, and style of interaction with CFT members that **creates an effective working alliance for change.**
- ▶ Initial activities set the tone for teamwork and team interactions that are consistent with [positive] effective practice.
- ▶ **Engagement doesn't just happen in meetings!**

ICPM DEFINITION:
ENGAGEMENT

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Needs and strengths are identified; preferences are prioritized. If engagement fails, it is likely that the plan will fail.

At times, hearing the family's story again will help to identify key strengths and needs that may have been missed.


Disengagement may indicate that an important need is not being met.

ICPM ELEMENT ONE: ENGAGEMENT

ICPM ENGAGEMENT BEHAVIORS:

- ❑ *Listen to the child, youth, family members, and others who have responsibility to care for a child or youth and demonstrate that you care about their thoughts and experiences.*
- ❑ *Demonstrate an interest in connecting with the child, youth, and family to help them identify and meet all their goals across all systems from which they are receiving services.*

ICPM ENGAGEMENT BEHAVIORS

- ❑ *Identify and engage family members and others who are important to the child, youth, and family.*
 - ❑ *Support and facilitate the family's capacity to advocate for themselves.*
 - ❑ *Meet the child, youth, and family at times and in locations that are convenient for them and where they are comfortable.*
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MEANINGFUL ENGAGEMENT

Is not about me persuading the family members to see issues and needs as I see them.

It is about persuading myself to see issues and needs from the family member's perspective, while ***limiting risk, enhancing safety to child and/or public.***

Resistance is nearly always the sign of **an unmet need.**

Be Transparent (Trust Youth and Family with the Truth)

ENGAGEMENT REQUIRES...

AWARENESS OF TRAUMA

- ▶ *Think about “what happened to him” rather than “what’s wrong with him.”*
- ▶ *Embrace not knowing what may be “right” for this youth or family.*
- ▶ *Trust the collective process of the CFT.*
- ▶ *Breathe, pause and connect with peers/others to manage your own reactions.*

Understand

parents' anger, fear, or avoidance may be a reaction to their own past traumatic experiences and not a personal "attack".

Remember

traumatized parents are not "bad" and that approaching them in a punitive way, blaming them, or judging them likely will worsen the situation rather than motivate a parent.

Build on

common ground - parents' desires to be effective in keeping their children safe and continuing their education while minimizing disruption.

Be
patient

with yourself and the families with whom you work

**ENGAGEMENT
MEANS THAT WE
WORK THROUGH
"RESISTANCE"**

TRAUMA AND ENGAGEMENT CONNECTIONS--

- ▶ Effective Engagement leads to understanding of Underlying Needs:
 - ▶ Physical and Emotional Safety
 - ▶ Trust for self and Others
 - ▶ Belonging
 - ▶ Autonomy

Genuinely engaged professionals recognize that even “bad” behavior has a function.

See through the behavior to understand one another's real needs.

Healing happens only in relationships.

► <https://>



OTHER HALLMARKS OF ENGAGEMENT

- ▶ Appreciative Inquiry— Verbally acknowledge the good intentions in others, before offering your own perspective.
- ▶ Strength-Based— Solution finding and insight are enhanced when brain chemicals are mobilized through positivity.
- ▶ Authenticity--Keeping it real. Families don't care about state, department or court rules. They want and need to be healed.
- ▶ Empowerment--Professionals must create the space for power to be shared. It's more than words and concepts...Decision Making Together!

A WORD ABOUT ENGAGEMENT AND SECONDARY TRAUMA

- ▶ When caring and engaged professionals spend long days absorbing the grief, loss, anxiety, and experiences of others, it becomes challenging to process that heaviness consistently and maintain objectivity and readiness for every day service.
- ▶ It is imperative that helpers invest in themselves /teammates to cope with the trauma they witness and absorb by caring for themselves routinely.

How is your supervisory process and organizational culture “Trauma Sensitive”?

ENGAGEMENT MAKES YOUR JOB LOVABLE!

- ▶ More successful service plans
- ▶ Better relationships within and across systems
- ▶ Fewer "no shows" for appointments and meetings
- ▶ Fewer runaways/AWOLs
- ▶ Reduces re-entry and recidivism
- ▶ Fewer crises/late night phone calls
- ▶ Reduced workload with more sharing of tasks!!!

NEVER FORGET...

You are the Gift!

Three parallel white lines of varying lengths, slanted upwards from left to right, located in the bottom right corner of the image.

NEXT MONTH--ASSESSMENT

